

	<b>CITY OF LAS VEGAS</b> <b>DEPARTMENT OF BUILDING &amp; SAFETY</b> <b>PERMIT APPLICATION</b>	<b>BAR CODE HERE</b>
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TYPE OR PRINT (BLACK INK ONLY)

Project # 157062-C-10 Parent # 119565-009

FOR: ☐ Commercial & Public Structures ☐ Single Family Residence

WORK DESCRIPTION: REVISION - STRUCTURAL - NCR

PERMITS REQUESTED: ☐ Building ☐ Mechanical Val \_\_\_\_\_

☐ Plumbing Val \_\_\_\_\_ ☐ Electrical Val \_\_\_\_\_

TOTAL VALUATION: \$ \_\_\_\_\_

ADDRESS: 300 STEWART ST ZIP: 89101

OWNER/BUILDER NAME: CITY OF LAS VEGAS

CONTRACTOR: APCO CONSTRUCTION

PROJECT/BUSINESS NAME: LAS VEGAS MUSEUM

CONTACT PHONE NO.: 366-1836 CONTACT FAX NO.: 366-9537

STATE CONTRACTOR LICENSE NO.: \_\_\_\_\_ CITY BUSINESS LICENSE NO.: \_\_\_\_\_

PARCEL NO.: \_\_\_\_\_ ZONE: \_\_\_\_\_

LOT(s): \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_

OCCUPANCY GROUP: \_\_\_\_\_ USE: \_\_\_\_\_ CONST. TYPE: \_\_\_\_\_

SQUARE FT OF FLOOR AREAS: 1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_ Garage \_\_\_\_\_

Patio \_\_\_\_\_ Balcony \_\_\_\_\_ Total \_\_\_\_\_ No. of Units \_\_\_\_\_ No. of Stories \_\_\_\_\_

SPECIAL CONDITIONS: \_\_\_\_\_

I state that the information I have supplied on this application is true and correct. By signing this application, I agree to comply with all conditions as noted on this permit.

Logan Quinn FEB 19, 2010  
Contractor or Agent / Owner Date

\_\_\_\_\_  
Planning Department Date

Land Development/Flood Control Engr. Date

\_\_\_\_\_  
Fire Department Date

3/4/10  
Building Department Date

TOTAL PERMIT FEE: \$ 125.00

PRE-PAID: Plan Review	\$ _____
PRE-PAID: Zoning	\$ _____
<b>TOTAL</b>	<b>\$ _____</b>

**Permit Expires 180 Days After  
Abandonment of Work**

Permits expire when no inspection has been requested for any  
180-day period after the permit has been issued.

RECEIVED



FEB 19 2010 157061

CORRECTION / REVISION  
TRACKING SHEET  
CITY OF LAS VEGAS

CLV PC # \_\_\_\_\_

APPL # 119565-C-00

TO BE COMPLETED BY THE QUALIFIED INDIVIDUAL TAKING THE RESPONSIBILITY FOR HAVING  
THE PLANS CORRECTLY COLLATED OR SUBMITTED

PLEASE PRINT

Project Name: Las Vegas Museum Date: FEB 19, 2010

Your Company Name: APCO

Phone #: 366-1836 FAX #: 366-9537

Plans submitted & response letters provided. Check all that apply.

	Plns	Ltrs		Plns	Ltrs		Plns	Ltrs
Architectural	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Land Development	<input type="checkbox"/>	<input type="checkbox"/>	Plumbing	<input type="checkbox"/>	<input type="checkbox"/>
Electrical	<input type="checkbox"/>	<input type="checkbox"/>	Mechanical	<input type="checkbox"/>	<input type="checkbox"/>	Structural	<input type="checkbox"/>	<input type="checkbox"/>
Fire Dept.	<input type="checkbox"/>	<input type="checkbox"/>	Planning	<input type="checkbox"/>	<input type="checkbox"/>			

- ☐ Site plan changes including landscape/electrical
- ☐ Floor plan changes that result in additional square footages
- ☐ Changes to elevation
- ☐ Changes to mechanical equipment on roof
- ☐ Scope of changes or revisions letter

List item OR sheet number(s) being added or replaced:

NCR CORRECTIONS TO PLANS  
PERMIT #119565

Name of person collating plans (print) \_\_\_\_\_

Signature \_\_\_\_\_

ROGER DROMAN  
Roger Droman

Technician Initial: \_\_\_\_\_

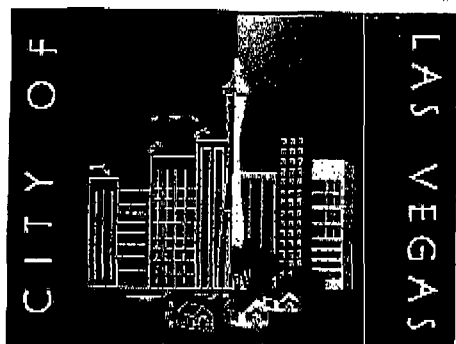
TRANSMISSION VERIFICATION REPORT

TIME : 03/04/2010 08:37  
NAME :  
FAX :  
TEL :  
SER.# : BROJ6J530588

DATE, TIME  
FAX NO./NAME  
DURATION  
PAGE(S)  
RESULT  
MODE

03/04 08:37  
3669537  
00:00:14  
01  
OK  
STANDARD  
ECM

**BUILDING & SAFETY**



**DEVELOPMENT  
SERVICES CENTER**

DSC, Permits Division  
731 South 4th Street  
Las Vegas NV 89101  
702-229-6251  
702-474-7369 FAX  
8AM to 5PM on Mon/Tue/Thu/Fri  
8:30AM to 5PM on Wed

**PLAN READY  
NOTICE**

366-9537

**Total Fees Due: 125.00**

Date: 3/4/2010

To: APCO CONSTRUCTION

Re: AP# 157062 REVISIONS

CITY OF LAS VEGAS MUSEUM

**Fee Breakdown**

ADMIN	50.00
PLAN CHECK	75.00

**Building & Safety Fees Due: 125.00**

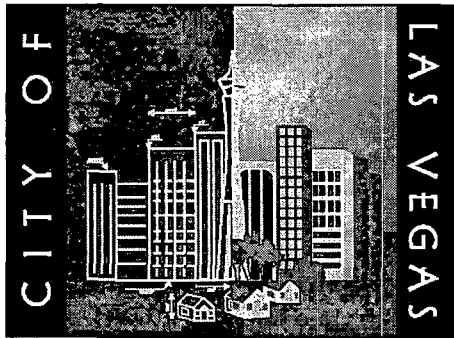
Your plans are ready to be picked-up. Please pull a ticket to see a cashier, and if paying by check, make it payable to the City of Las Vegas. MasterCard, Visa, and Discover credit/debit cards are also accepted. If you have any questions, please call the number above.

**When picking-up a permit:**

Licensed contractors must provide their:

- pre-printed company check or company credit card (company name must match license) or

# BUILDING & SAFETY



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- pre-printed company check or company credit card (company name must match license); **or**
- **if paying by any other means**, original Nevada State Contractors' Board card; **or**
- **if applicable**, authorized designee with a letter on company letterhead, signed by a principal of their company, specifically listing their designee's name, check number, and check amount.

Owner builders must provide their:

- proof of ownership (i.e., copy of deed to project property); **and**
- completed Nevada State Contractors' Board Owner Builder Affidavit of Exemption form; **and**
- **if applicable**, authorized designee with a notarized letter, signed by the property owner, specifically listing their designee's name and their permission to pick-up their permit.

**Photo ID is required  
with all in-person transactions.**

**Cashiers Close at 4:30 PM.**